File Nu	mber:			OMB APPROVAL
1	35-10177			OMB Number: 3235-033
	reporting period ended			Expires: July 31, 200
Decemb	per 31. 2001			Estimated average burden hours per full response 6.00
L		02004	676	Estimated average burden
		**************************************	· -	hours per intermediate
	PROCESSED		KCHANGE COMMISSION	response
2 2 2012		Washington, D.C. 20549		hours per minimum
	JUN 2 8 2002		•	response
	THOMSON FINANCIAL	FOR	M TA-2	
		R REPORTING ACT	IVITIES OF TRANSFI	ER AGENTS
RE	GISTERED PURSUANT	TO SECTION 17A	OF THE SECURITIES	EXCHANGE ACT OF 1934
				^
	ATTENTION:	INTENTIONAL M	ISSTATEMENTS OR	MISSIONS OF FACT
		CONSTITUTE FEI	DERAL CRIMINAL VI	ÓLATIONS.
		See 18 U.S.C. 1001	and 15 U.S.C. 78 (f(a)	D
				·-
_			· · · · · · · · · · · · · · · · · · ·	ediation mar 2.5 2012
	Il name of Registrant as stated	•	[A-1:	
ואס	not use Form TA-2 to change name	or address.)	The second secon	6.00
	FIRST CENT	URY BANK, NA		
2. a .		URY BANK, NA has the Registrant engage	ed a service company to perfo	orm any of its transfer agent functions
2. a .	During the reporting period,	· · · · · · · · · · · · · · · · · · ·	ed a service company to perfo	orm any of its transfer agent functions
	During the reporting period, (Check appropriate box.)	has the Registrant engage Some	X None	
2. a. b.	During the reporting period, (Check appropriate box.) All If the answer to subsection	Some (a) is all or some, prov	X None	
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged:	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	er agent file number(s) of all service
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	er agent file number(s) of all service
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s):	Some (a) is all or some, prov	X None	r agent file number(s) of all servic
	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s): N/A	Some (a) is all or some, prov	X None ide the name(s) and transfe	File No. (beginning with 84- or 85-):
b.	During the reporting period. (Check appropriate box.) All If the answer to subsection company(ies) engaged: Name of Transfer Agent(s): N/A During the reporting period.	Some (a) is all or some, proven the some and the Registrant been established to the some and th	X None ide the name(s) and transfe	orm any of its transfer agent functions or agent file number(s) of all service. File No. (beginning with 84- or 85-):

Registrant has been engaged as a service company to perform transfer agent functions: (If more room is required, please

File No. (beginning with 84- or 85-):

complete and attach the Supplement to Form TA-2.)

Name of Transfer Agent(s):

N/A

III. Federal Information Law and Requirements.

SEC's Collection of Information: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid control number. Under Sections 17, 17A(c) and 23(a) of the Act and the rules and regulations thereunder, the SEC is authorized to solicit from registered transfer agents the information required to be supplied on Form TA-2. The filing of this Form is mandatory for all registered transfer agents. The information will be used for the principal purpose of regulating registered transfer agents but may be used for all routine uses of the SEC or of the ARAs. Information supplied on this Form will be included routinely in the public files of the ARAs and will be available for inspection by any interested person. Any member of the public may direct to the SEC any comments concerning the accuracy of the burden estimate on the application facing page of this Form, and any suggestions for reducing this burden. The Office of Management and Budget has reviewed this collection of information in accordance with the clearance requirements of 44 U.S.C. 3507. The applicable Privacy Act system of records is SEC-2. Form TA-2 is subject to the routine uses set forth at 40 FR 39255 (Aug. 27, 1975) and 41 FR 5318 (Feb. 5, 1976).

3.	a.	Board of C	er of the Curre	ncy e Corpoi e Federa	ration al Reserve Sys	•	ox only	·.)			
	b.					nded Form TA-l complete, or mi				ving the date on w box.)	hich
			amendment(s) to file amendm able	ent(s)							
_	c.	If the answer t	o subsection (t	o) is no,	provide an exp	planation:					
		If	the response	to any	of question	s 4-11 below	is noi	ne or zer	o, enter "0.		
4.	Nu	mber of items re	eceived for tran	nsfer dur	ing the report	ing period:	•••••			103	
5.	a.	Total number of System (DRS),				, including acco direct purchase					
			r 31:		••••••••••	estment plan an	••••••			104	_
	d.									wing categories a	s of
		Corporate Equity Securities	Corporate Debt Securities		Open-End Investment Company Securities	Limited Partnersh Securitie	nip	Municip Secu	pal Debt rities	Other Securities	
		100%									
6.	Nu	mber of securitie	es issues for w	hich Reg	gistrant acted i	n the following	capaci	ties, as of	December 31	:	
				Equity	Corporate Securities	Open-End Investment Company Securities	Pau	imited rtnership ecurities	Municipal Debt Securities	Other Securities	
	a. b.		he master files: for transfer aintain the holder files: re items for	Squit							
		transfer but ma			1	1					

7.		Scope of certain additional types of activities performed: a. Number of issues for which dividend reinvestment plan and/or direct purchase plan services were provided, as of December 31:							
	b.	b. Number of issues for which DRS services were provided, as of December 31:							
		Dividend disbursement and interest paying agent activities conducted during the reporting period:							
		i. number of issues							
		ii. amount (in dollars)							
8.	a.	Number and aggregate market value of securities aged record differences, existing for more than 30 days, as of December 31:							
		Prior Current Transfer Agent(s) Transfer Agent (If applicable)							
		i. Number of issues							
		ii. Market value (in dollars)							
	b.	Number of quarterly reports regarding buy-ins filed by the Registrant with its ARA (including the SEC) during the reporting period pursuant to Rule 17Ad-11(c)(2):							
	c.	During the reporting period, did the Registrant file all quarterly reports regarding buy-ins with its ARA (including the SEC) required by Rule 17Ad-11(c)(2)?							
		Yes No							
	d.	If the answers to subsection (c) is no, provide an explanation for each failure to file:							
9.	a.	During the reporting period, has the Registrant always been in compliance with the turnaround time for routine items as set forth in Rule 17Ad-2?							
		☐ Yes ☐ No							
		If the answer to subsection (a) is no, complete subsections (i) through (ii).							
		i. Provide the number of months during the reporting period in which the Registrant was not in compliance with the turnaround time for routine items according to Rule 17Ad-2.							
		ii. Provide the number of written notices Registrant filed during the reporting period with the SEC and with its ARA that reported its noncompliance with turnaround time for routine items according to Rule 17Ad-2.							
10.		mber of open-end investment company securities purchases and redemptions (transactions) excluding dividend, interest distribution postings, and address changes processed during the reporting period: Total number of transactions processed:							
	b.								

11. a. During the reporting period, provide the date of all database searches conducted for lost securityholder accounts listed on the transfer agent's master securityholder files, the number of lost securityholder accounts for which a database search has been conducted, and the number of lost securityholder accounts for which a different address has been obtained as a result of a database search:

Number of Lost Securityholder Accounts Submitted for Database Search	Number of Different Addresses Obtained from Database Search
NONE	NONE
	Securityholder Accounts Submitted for Database Search

b.	Number of lost securityholder accounts that have been remitted to states during the
	reporting period:

SIGNATURE: The Registrant submitting this Form, and the person signing the Form, hereby represent that all the information contained in the Form is true, correct, and complete.

Manual signature of Official responsible for Form:	Title:		
4	TRUST OPERATIONS OFFICER		
Carol a. Oliver	Telephone number: 304-324-3220		
: Name of Official responsible for Form:	Date signed		
(First name, Middle name, Last name)	(Month/Day/Year):		
CAROL ANN OLIVER	3/7/2002		

File Number	Supplement to Form TA-2	
For the reporting period ended December 31,	Full Name of Registrant	

Use this schedule to provide the name(s) and file number(s) of the named transfer agent(s) for which the Registrant has been engaged as a service company to perform transfer agent functions:

Name(s):	File No. (beginning with 84- or 85-):
	(cogning with over or or).
·	
